

Chapter H 32

NURSING HOMES

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DEFINITIONS AND ADMINISTRATION

H 32.01 Definitions. (1) **NURSING HOME** means any building, structure, institution, agency or other place, whether proprietary, non-governmental or governmental, for the reception and care or treatment not less than 72 hours in any week of three or more unrelated individuals hereinafter designated patients, who by reason of aging, illness, blindness, disease or physical or mental infirmity desire any such service, and for which reception and care or treatment a charge is made; provided that the reception and care or treatment in a household or family, for compensation, of a person related by blood to the head of such household or family, or to his or her spouse, within the degree of consanguinity of first cousin, shall not constitute the premises a nursing home. The term "nursing home" shall include, but not in limitation thereof, boarding and convalescent homes for the aged, infirm or chronically ill as they may fall within the foregoing definition. The term "nursing home" shall not include institutions operated by the federal government or county institutions subject to the supervision of the state department of public welfare under sections 46.16 (1) and 46.17 (1), Wis. Stats., offices of practitioners treating the sick, nor to child care centers, day nurseries, maternity homes, nursery schools, foster homes, child placing or child welfare agencies as defined under the laws of this state; nor shall such term include hotels, general hospitals, institutions for the treatment and care of psychiatric and tuberculosis patients, and child care institutions; provided, that any hotel or institution or part thereof,

which comes within the above definition of nursing home shall be so regarded as to the part so operated. Section 146.30 (1) (a), Wis. Stats.

(2) NURSING HOMES FOR AMBULATORY PATIENTS shall mean a nursing home for ambulatory persons requiring personal services, dietary, nursing or medical care, but exclusive of bedfast patients and chairfast patients.

(3) NURSING HOME FOR BEDFAST PATIENTS shall mean a nursing home ordinarily caring for one or more bedfast or chairfast persons.

(4) GENERAL HOSPITAL means an institution providing community service for in-patient medical and surgical care of the sick or injured, including obstetrics in which not more than 50 percent of the total patient days during the year are customarily assignable to the following categories of cases: chronic, convalescent and rest, drug and alcoholic, epileptic, mentally deficient, mental, nervous and mental, and tuberculosis. Section 146.30 (1) (b), Wis. Stats.

(6) PATIENT means an individual cared for or treated in any nursing home, irrespective of how admitted. Section 146.30 (1) (c), Wis. Stats.

(7) An AMBULATORY PATIENT is a person requiring personal services, dietary, nursing or medical care, but is not confined to a bed or chair.

(8) A BEDFAST PATIENT is a person who is normally confined to a bed or chair.

(10) STANDARDS means rules, regulations and standards established with the advice and consultation of the advisory committee and approved by the board, relating to the (a) care, treatment, health, safety, welfare, and comfort of patients and (b) construction, general hygiene, maintenance and operation which, in the light of advancing knowledge, will promote safe and adequate accommodation.

(15) ACCREDITED NURSING HOMES. Nursing homes operating at a standard above the minimum required for licensing may be determined by the board to be *accredited nursing homes*, and their names listed in a book maintained for that purpose by the board. Section 146.30 (12), Wis. Stats.

(16) BASIS FOR ACCREDITATION. A nursing home shall be listed as an "Accredited Nursing Home" when the nursing home meets substantially the recommended standards above the minimum required for licensing. Facilities, personnel, type and number of patients and residents shall be considered in accreditation.

(17) PROVISIONAL LICENSE. A provisional license may be issued to any nursing home, the facilities of which are in use or needed for patients, but which is temporarily unable to conform to all the established rules. A provisional license may not be issued for more than one year.

(20) MAXIMUM BED CAPACITY. Maximum bed capacity shall mean the exact number of beds allowed by these standards and specified in the license by room number and room capacity to accommodate patients in each home, exclusive of the licensee, his family, and employes.

(25) **LICENSEE OR LICENSED OPERATOR** is the "person" (defined in section 146.30 (1) (d), Wis. Stats.) to whom the license is issued.

(26) **ADMINISTRATIVE HEAD** is the person, not necessarily the licensee, who is directly responsible for the daily operations, activities, supervision of employes, and care of patients.

(30) **PERSON** means any individual, firm, partnership, corporation, company or association and the legal successor thereof. Section 146.30 (1) (d), Wis. Stats.

(31) **BOARD** means the state board of health as that term is defined in section 140.01, Wis. Stats. Section 146.30 (1) (e), Wis. Stats.

(32) **RULE** has the meaning ascribed in section 227.01 (2), Wis. Stats. Section 146.30 (1) (f), Wis. Stats.

History: 1-2-56; r. and recr. (16) and (20), Register, June, 1959, No. 42, eff. 7-1-59.

H 32.04 Trailers restricted. Trailer houses shall not be used for housing patients.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

H 32.06 History: 1-2-56; r. Register, June, 1959, No. 42, eff. 7-1-59.

H 32.07: 1-2-56; r. Register, June, 1959, No. 42, eff. 7-1-59.

H 32.10 Structures restricted for nursing home use; tourists; transients. Nursing homes shall not be approved in structures which are also occupied for purposes detrimental to the health, safety and well-being of the patients and residents. Nursing homes shall not permit the use of licensed beds by tourists or transients.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

H 32.12 Children of personnel restricted. Children under 16 years of age related to the licensee or an employe shall not be permitted in patient bedrooms, bathrooms, or patient care areas.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

H 32.13 Mail. Incoming or outgoing mail belonging to the patient shall not in any way be tampered with except on the written notification by the patient or guardian.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

QUALIFICATIONS AND RESPONSIBILITIES OF LICENSEE

H 32.155 Applicant to be interviewed. Every applicant for a nursing home license shall be interviewed to determine fitness and qualification, including financial status.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

H 32.19 Person in charge. There shall be one person in charge of the nursing home. She shall be a qualified person with sufficient experience to be responsible for the care of the patients. She shall meet the following qualifications:

- (1) She shall be in good physical and mental health.
- (2) She shall be clean, neatly and appropriately dressed, capable, reliable, possessing ability and willingness to carry out instructions of physicians.
- (3) She shall be a person of mature judgment.
- (4) She shall be of good moral character.

History: 1-2-56; r., recr., and renun. from H 33.01 to be H 32.19, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.251 Minimum education—recommendation. It is *recommended* that as a minimum the person in charge of the home have four years of high school or its equivalent.

History: 1-2-56; r. recr. and renum. from H 33.011 to be H 32.251, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.265 Minimum experience—recommendation. It is *recommended* that the person in charge of the home be a registered nurse, licensed trained practical nurse, or a person who can supply evidence of at least 3 years of responsible practical nursing care experience in the last 5, under the supervision of a registered nurse or a licensed physician.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

H 32.301 Licensee responsible for action of employes. The operator and employes shall not abuse or punish any patient of the home by any method or physical force, confinement to a room, or by withholding food and water. The licensee shall be held responsible for such action on the part of all employes.

History: 1-2-56; renum. from H 33.18 to be H 32.301, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.33 Delegation of responsibility. The person in charge shall not leave the premises without delegating necessary responsibility to a competent person over 18 years of age. This person shall not be one of the patients or residents receiving care in the home.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

STAFFING AND EMPLOYES

H 32.40 Familiarity with rules. The licensee and employes shall be familiar with the rules prescribed for the maintenance and operation of the home. A copy of the rules shall be available to all employes at all times.

History: 1-2-56; r. recr. and renum. from H 32.30 to be H 32.40, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.42 Adequate personnel. Sufficient personnel shall be employed to give adequate care to patients during the day and night.

History: 1-2-56; renum. from H 33.03 to be H 32.42, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.45 Employe suspected of communicable disease. Any employe shall be excluded from work who is suspected of having a communicable disease or who has been diagnosed by a physician as having a communicable disease.

History: 1-2-56; renum. from H 32.17 to be H 32.45, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.46 Night supervision. There shall be at least one night attendant in good physical and mental condition. The night attendant shall be up and dressed in any home caring for bedridden or semi-ambulatory patients. Such attendant shall be at least 18 years of age and capable of performing evacuation duties.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

H 32.50 Separate quarters, family and staff. Separate living and sleeping quarters shall be provided for the family and staff.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

Register, February, 1963, No. 86

H 32.60 Consulting nurse—recommendation. It is *recommended* that when a shortage of nurses precludes full-time employment of a qualified nurse, the licensed operator obtain the services of a registered nurse on a consultation basis where skilled nursing services are required.

History: 1-2-56; renum. from H 33.15 to be H 32.60, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.65 In-service training—recommendation. It is *recommended* that an adequate in-service training program be developed for the size of home operated.

History: 1-2-56; renum. from H 32.25 to be H 32.65, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.66 Red Cross nursing classes—recommendation. It is *recommended* that persons performing nursing service attend Red Cross nursing classes in order to become more familiar with the care of patients.

History: 1-2-56; renum. from H 32.26 to be H 32.66, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.67 Attendance at institutes—recommendation. It is *recommended* that whenever feasible employes be encouraged to attend institutes and other courses given by educational institutions, national and state organizations, and governmental agencies in the maintenance and operation of nursing homes.

History: 1-2-56; renum. from H 32.27 to be H 32.67, Register, June, 1959, No. 42, eff. 7-1-59.

ADMISSION POLICIES

H 32.70 Restriction of admissions. Maternity patients, mentally ill patients, children under 16, and persons having or suspected of having a communicable disease endangering other patients shall not be admitted or retained in a nursing home.

History: 1-2-56; r., recr. and renum. from H 32.05 to be H 32.70, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.71 Restriction of admissions—recommendation. It is *recommended* that only those persons be admitted and retained for whom the nursing home can provide adequate care.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

H 32.75 Admission from hospitals. A patient transferred from a hospital can be admitted to the nursing home upon certification in writing by a physician that the patient has had a physical examination, including an x-ray of the chest, at the hospital and is free of any communicable disease.

History: 1-2-56; renum. from H 32.16 to be H 32.75, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.78 Physical examinations; chest x-rays; prior to admission or employment. Personnel, patients and residents shall have a complete physical examination by a licensed physician, including an x-ray of the chest, within a sixty-day period prior to being admitted or beginning work. Each patient or his guardian shall designate a personal physician. It shall be the duty of the administrator to inform the patient's physician of such designation and to arrange for the first and subsequent physical examinations. The physician shall certify in

writing that the person examined has had a physical examination, including an x-ray of the chest, and is free of any communicable disease. Such certification shall be kept with the patient's records.

History: 1-2-56; r., recr. and renum. from H 32.15 to be H 32.78, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.784 Annual physical examinations; tuberculin test; personnel and family. After the initial examination, including a chest x-ray, personnel and members of a family living in a nursing home shall have an annual physical examination including a tuberculin test. Persons with a positive tuberculin test shall have a chest x-ray annually. Once the tuberculin test is found to be positive, it need not be repeated. The physician shall certify that the person examined is free of communicable disease.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.

RECORDS AND REPORTS

H 32.80 Records and reports. Adequate and up-to-date records shall be maintained and shall contain at least the following data:

- (1) Patient's full name.
- (2) Home address or last known address.
- (3) Address of hospital, nursing home, or home for the aged where last cared for.
- (4) Telephone number.
- (5) Name of nearest kin.
- (6) Address of nearest kin.
- (7) Telephone number of nearest kin.
- (8) Date of birth.
- (9) Sex.
- (10) Name of patient's physician.
- (11) Address of physician.
- (12) Telephone number of physician.
- (13) Date and time of admission.
- (14) Date and time of transfer.
- (15) Date and time of discharge.
- (16) Date and time of death.
- (17) Principal cause of death, if known.
- (18) Person to whom body was released on death.

These records and reports shall be readily available at all times to the person in charge of patient care.

History: 1-2-56; r., recr. and renum. from H 32.08 to be H 32.80, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.81 Records and reports—recommendation. It is *recommended* that the following additional data be recorded:

- (1) Social security number.
- (2) Color.
- (3) Race.
- (4) Nationality.
- (5) Religion (name of pastor and church if obtainable).
- (6) Record of charges for type of services rendered and length of stay.
- (7) Name of person or agency responsible for payment of services rendered to the patient.

(8) Personal property: An inventory be made of money or other valuables possessed by the patient at time of his entrance; copy of such list be made in duplicate, signed by the operator and patient or his agent, and one copy given to the patient or his agent.

(9) Marital status.

History: 1-2-56; renum. from H 32.09 to be H 32.81, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.85 Chart on patient. A chart, containing carefully recorded nurse's notes pertaining to the care and treatment rendered, shall be kept on every patient.

History: 1-2-56; r., recr. and renum. from H 33.16 to be H 32.85, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.86 Reporting to attending physician. Symptoms and complaints, including unusual body marks and bruises, of persons being cared for shall be observed, recorded and reported to the attending physician by the person in charge, nurse or attendant.

History: 1-2-56; r., recr. and renum. from H 33.14 to be H 32.86, Register, June, 1959, No. 42, eff. 7-1-59.

H 32.89 Reporting accident to physician. The nursing home administrator shall notify a licensed physician for a prompt medical examination for any person who has an accident even though no injury is apparent. A written report shall be recorded on each accident by the person in charge.

History: Cr. Register, June, 1959, No. 42, eff. 7-1-59.